PLEASE TYPE OR PRINT	Entered previous May Show
	ves □ no
☐ Ms. \	/ 1,000
Mr. Artist Joe	-ruce
Permanent _ \ \	(Last Name Last)
Address 97/1 MADISC	on Ave. Charland
Street	
44102 Tel. 1216	1281-6661
Zip Area Code	
Temporary or	
Studio Address 9711 WA	
	City
44102 Tel. 1216	1 281-6661
Zip Area Code	
If you do not presently live in	one of the counties of the
Western Reserve, in which cou	nty were you born?
Collaborator	
(If An	
If May Show entries are not ac	bepted or not sold:
M Artist will pick up at Muse	
Museum should dispose of	
Museum should ship to art	ist at artist's expense
to this address:	
Special Instructions	

> DO NOT DETACH

ACCEPTED BO N THIS

DO NOT WRITE IN THIS SECTION

ACCEPTED RECEI

DATE